

City of Troy

Reassessment Update Project 2013

 **GAR Associates, Inc.**
Real Estate Appraisers and Consultants
Contractor for City of Troy

Enclosed is a data survey form. The goal of this form is to help confirm the data for your property. The type of information listed is recorded at the Assessor's Office. The following is an explanation of the data items to help you complete the data on this form. The items listed on this form are basic inventory items.

This data verification is an important step in creating fair and equitable assessments for your community. We welcome any additional comments or information regarding your property or the project in general.

Sources of Information for some of the referenced items below

- Property Survey*
- Appraisal* If you have recently purchased or refinanced your property, you may have one.
- Contract of Sale.
- Real Estate listing. If your property is listed for sale, your realtor will have some of the information.

***Please note:** We do **not** expect you to have a new survey or appraisal done of your property. If you have a survey or appraisal of your property with your household records, it would be of value to you to verify such information as building dimensions and land dimensions/acreage, etc.

Please return your completed form by September 10, 2010

Thank you for your assistance.

Explanation of Data Survey Form Items

1. **Property Use** Number of living units contained in the structure (One, two, three, four family or more, or Commercial)
2. **Owner Occupied** Owner resides at the property.
3. **Utilities** Presence or availability of gas, electric or both to the property.
4. **Year Built** Approximate year of construction, actual if known.
Style Classify the residence as to its architectural style.
5. **Exterior Wall Material** Indicate the predominate facing material used for the exterior walls.

PLEASE TURN OVER

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6. Number of Kitchens

Kitchen = sink, range or oven, and refrigerator

Number of Baths

Full Bath = toilet, water basin, and bathtub or shower stall

Half Bath = toilet and water basin.

Number of Bedrooms

Rooms designed to be used primarily as a bedroom even if currently used as an office, den, etc. Typically have a closet.

Kitchen or Bath Remodeled in last 10 years

- 7. Fireplaces** **Number** of openings for functional fireplaces. Do not include woodstoves or freestanding fireplaces.
- 8. Heat type** Indicate the type of heating that supplies most to all of the living area of the building.
- 9. Fuel type** Indicate the primary/predominate fuel source.
- 10. Central Air Conditioning** Central air conditioning unit that supplies most or all of the building.
- 11. Basement Type** Indicate the type of basement and foundation upon which the house is built.
- | | |
|-----------|---|
| Pier/slab | No basement. Built on concrete slab, piers or pilings. |
| Crawl | An area between the ground and a joisted first floor set on foundation walls. |
| Partial | An area 6+ ft in height beneath 75% or less of 1 st floor. Remainder may be crawl, pier, slab. |
| Full | An area 6+ ft in height beneath 75% or more of 1 st floor. |
- Finished Basement Square footage or percentage of basement area finished for use as living area.
- 12. Garage Size** Number of garages, year built, attached or detached, # of cars/bays
- 13. Driveway** Indicate if the driveway is shared.
- 14. Additional Residences** Indicate if other residences, in addition to the primary residence, exist on the property.
- 15. Other Structures** Any improvements to the residence or other structures on the site. Porches, decks, in ground/above ground pools, sheds etc. The size, age & year built.

City of Troy
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Tina Dimitriadis
Assessor

 **GAR Associates, Inc.**
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Contractor for City of Troy

Owner Name and Mailing Address:

Return survey by 9/10/2010

Please sign and return form to:

Assessor
City of Troy NY
1776 Sixth Ave
Troy, NY 12180

Property Address

Contact Phone Number _____

Fill in or circle choice :

1. Property Use _____
(One, two, or three family; four or more; Commercial)
2. Owner Occupied: Yes ___ No ___
3. Utilities _____
(none, gas/propane, electric, gas & electric)
4. Approximate Year Built/Style _____

(Colonial, Ranch, Split Level, Raised Ranch, Cape Cod, Old Style, etc.)
5. Exterior Wall Material _____
(wood, brick, aluminum/vinyl, composition, concrete, stucco, stone)
6. Number of Kitchens _____
Number of Baths _____ Full _____ Half _____
Number of Bedrooms _____
Has there been a kitchen or bath remodeled in the last 10 years? _____
7. Number of Fireplaces _____
8. Heat type _____
(no central, hot air, hot water/steam, electric)
9. Fuel Type _____
(none, gas, electric, oil, wood, solar, coal, geothermal)
10. Central Air Conditioning _____ yes ___ no ___
11. Basement Type _____
(pier/slab, crawl, partial, full)
Finished Basement Size _____
12. Garage _____ # of cars or bays
Year Built _____ Attached ___ Detached ___
13. Driveway: Yes ___ No ___ Shared ___
14. Additional Residences _____

(Carriage House, Garage Apartment etc....)
15. Other Structures (porches, decks, sheds, etc) :

<u>Structure</u>	<u>Dimensions</u>	<u>Year Built</u>
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Signature _____ **Date** _____